PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application or Docket Number																					
PATENT APPLICATION FEE DETERMINATION RECOR								Uhm 04-1													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY			OR	OTHER THAN										
FOR		NUMB	ER FILED		NUMBER EXTRA		R	ATE	FEE		RATE	FEE									
	SIC FEE CFR 1.16(a))		·	· · · · · · · · · · · · · · · · · · ·					\$385	OR		\$									
	AL CLAIMS CFR 1.16(c))		// mini	ıs 20 =	* 0		x \$	=		OR	x \$ =										
IND	EPENDENT CLA	MS	2 mir	nus 3 =	* U		x _	=		OR	x =										
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+_	=		OR	+=										
♣ If the difference in column 1 is less then zero, enter "0" in column 2						TC	TAL		OR	TOTAL											
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER T										
AMENDMENT A	, to 100	CLAIMS REMAINING AFTER AMENDMENT		NL PREV	GHEST JMBER JIOUSLY ID FOR	PRESENT EXTRA	R.	ATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE									
	Total (37 CFR 1.16(c))	*	Minus	**		=	x \$=	=			x \$=										
	Independent (37 CFR 1.16(b))	*	Minus ***			=	x _	_=		OR OR	x=										
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							=		OR	+=										
	(Column 1) (Column 2) (Column 3)							TAL FEE		OR A	TOTAL DDIT. FEE										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total (37 CFR 1.16(c))	•	Minus	**		=	x \$	=		OR	x \$=										
	Independent (37 CFR 1.16(b))	\$	Minus	***		=		=		OR OR	x=										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 C					(37 CFR 1.16(d))] [-	=		OR	+=										
(Column 1) (Column 2) (Column 3)								OTAL r. FEE		OR _A	TOTAL DDIT. FEE										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total (37 CFR 1.16(e))	*	Minus	**		=	x \$_	=		OR	x \$=										
	Independent (37 CFR 1.16(b))	*	Minus	***		=] x	=		OR OR	x=										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							=		OR	+=										
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". TOTAL ADDIT. FEE ADDIT. FEE																					
*** [f	the "Highest Nur re "Highest Number	nber Previously Pa	id For" IN THI	S SPACI	E is less than 3	, enter "3".	l in the c=	nmeio	ta hav in achu	*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the bighest number found in the appropriate box in column 1.											